•	ICATION FEE DETE			SMALLEN	8/1	19/	S A	HAN
CLAIMS AS FILED - PART I (Column 1) (Column 2)			TYPE [<u> </u>		MALL EN	FEE	
FOR	NUMBER FILED	NUMBER EXTE	A	RATE	FEE 355	OR		710
BASIC FEE	minus 20=			X\$ 9=		OR X	\$18=	
TOTAL CLAIMS				X40=		OR ;	¢Ø=	
INDEPENDENT CLAIMS MULTIPLE DEPENDENT	'i			+135 =		نا"ك	270=	
MULTIPLE DE COM	olumn 1 is less than zero,	enter "0" in colum	nn 2	TOTAL			OTAL L	THAN
• If the difference in C	MS AS AMENDED -	PAKI II		SMALLE	NTITY	OR S	MALLE	MITTY
(0	column 1)	HIGHEST	olumn 3) REȘENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
E A	MENDMENT	PAID FOR	7	X\$ 9=	ř.	OR	X\$18=	106
Total * Independent *	Minus			X40=		OR	X80=	
Independent * FIRST PRESENTA	ATION OF MULTIPLE DEPE	NDENT CLAIM		+135=		OR	+270=	
andt		o ((Column 3)	ADOIT. FEE		 	DOIT. FEE	ADDI-
	Column 1) CLAIMS REMAINING	HIGHEST	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	-	RATE	TIONA
	AFTER AMENOMENT Minus	PAID FOR	7	X\$ 9=		OR	X\$18=	-
Total * Independent *	2: Minus	***		X40=	1-4	OR	XBO	
A GOST PRESEN	TATION OF MULTIPLE DE	ENDENT CLAIM		+135=	1	OR	+27.0=	1-
PINST TIES				ADDIT. FE	<u>د</u> ا	OR	ADDIT. FE	
0	(Column 1) CLAIMS REMAINING	HIGHEST NUMBER PREVIOUSLY	(Column 3) PRESENT EXTRA	RATE	ADDI TION FEE	AL.	PATE	TION FE
E STATE OF THE STA	AFTER AMENDMENT	PAID FOR	=	X\$ 9=		OR		-
Total Independent GREET PRESE	Minus Minus	444	6	X40.		ОЯ		-
FIRST PRESE	NTATION OF MULTIPLE DI	EPENDENT CLAIM		+135:	-	OR	10	TAL
If the entry in column in the Trichest Number	mn 1 is less than the entry in or mber Previously Paid For IN T mber Previously Paid For IN 1	otumn 2, write "o" in oo HIS SPACE is less thi NIS SPACE is less th	kumn 3. un 20. enter "20 an 3. enter "3."	TOT ADDIT. F	EE L appropria	te box in	adolf. f column 1.	:EE
The Tighest Num	mn 1 is less than the old by interpretation of the temper previously Paid For INT inter Previously Paid For (Total Inter Previously Paid For (Total Interpretation)	or independent) is th	e highest nume			IIS C	EPARTMEN	IT OF COM